2009 021479

2009 APR -3 AM 9: 07

MICHAEL A. BROWN RECORDER

LAKE COUNTY TRUST COMPANY

Trustee's Deed

620091113

This Indenture Witnesseth that, LAKE COUNTY TRUST COMPANY, AS TRUSTEE under the provisions of a Trust Agreement dated May 17, 1989, and known as Trust No. 1901 in Lake County, and State of Indiana, does hereby grant, bargain, sell and convey to:

Timothy Crouse and Celina Crouse, Husband and Wife

for the sum of ten dollars (\$10.00) and other good and valuable consideration the following described Real Estate in the **County of Lake** and State of Indiana, to wit:

Lot 1220, Lakes of the Four Seasons, Unit 9, as per plat thereof, recorded in Plat Book 38, Page 78, in the Office of the Recorder of Lake County, Indiana.

Commonly known as: 3877 Kingsway Drive, Crown Point, Indiana 46307

Address of Grantee:

CHCAGO TITLE INSURANCE GOMPANY

Key No.: 45-17-16-180-016.000-044

After recording, return deed and mail future tax statements to: 3877 Kingsway Drive

Crown Point, Indiana 46307

This Deed is executed pursuant to, and in the exercise of, the power and authority granted to and vested in the said Trustee by the terms of said Deed or Deeds in Trust delivered to the said Trustee in pursuance of the Trust Agreement above mentioned, and subject to all restrictions of record.

IN WITNESS WHEREOF, the said LAKE COUNTY TRUST COMPANY, as Trustee, by Elaine M. Sievers, Trust Officer, has hereunto set its hand this 20th day of March 2009.

> LAKE COUNTY TRUST COMPANY, as Trustee as aforesaid,

BY: Teaus M. Yours Elaine M. Sievers, Trust Officer

DULY ENTERED FOR TAXATION SUBJECT TO FINAL ACCEPTANCE FOR TRANSFER

STATE OF INDIANZEGRY HOLINGA KATONA AKE COUNTY AUDITOR

COUNTY OF LAKE

Before me, the undersigned, a Notary Public in and for said County and State, personally appeared the within named Officer of the LAKE COUNTY TRUST COMPANY, who acknowledged the execution of the foregoing instrument as the free and voluntary act of said corporation, and as her free and voluntary act, acting for such corporation, as Trustee.

Witness my hand and seal this 20th day of March 2009.

Hesta Smith, Notary Public

My Commission expires: 10-11-15

Laké County, Indiana resident

This instrument was prepared by: Elaine M. Sievers, Attorney at Law

I affirm, under penalties for perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law. Elaine M. Sievers, Attorney at Law

STEGAGO TITLE INSURANCE COMPANY

10 Cp